



COVER PAGE

2011 FEB 28 PM 12:54

TP

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
 Allwardt Jack Russell

1. Office, Agency, or Court

Agency Name

City of Exeter

Division, Board, Department, District, if applicable

Your Position

City Council

Council Member

► If filing for multiple positions, list below or on an attachment.

Agency: _____ Position: _____

2. Jurisdiction of Office (Check at least one box)☐ State☐ Judge (Statewide Jurisdiction)☐ Multi-County _____☐ County of _____☐ City of _____☐ Other _____**3. Type of Statement (Check at least one box)**☒ **Annual:** The period covered is January 1, 2010, through December 31, 2010.

-or-

The period covered is ____/____/____, through December 31, 2010.

☐ **Leaving Office:** Date Left ____/____/____
(Check one)☐ The period covered is January 1, 2010, through the date of leaving office.☐ The period covered is ____/____/____, through the date of leaving office.☐ **Assuming Office:** Date ____/____/____☐ **Candidate:** Election Year _____ Office sought, if different than Part 1: _____**4. Schedule Summary**

Check applicable schedules or "None."

► Total number of pages including this cover page: 2☐ **Schedule A-1 - Investments** – schedule attached☐ **Schedule C - Income, Loans, & Business Positions** – schedule attached☐ **Schedule A-2 - Investments** – schedule attached☒ **Schedule D - Income – Gifts** – schedule attached☐ **Schedule B - Real Property** – schedule attached☐ **Schedule E - Income – Gifts – Travel Payments** – schedule attached

-or-

☐ **None - No reportable interests on any schedule**

I certify under penalty of perjury under the laws of the State of California that

Date Signed January 28, 2011
(month, day, year)

Signature _____

SCHEDULE D Income – Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name Allwardt, Jack Russell

► NAME OF SOURCE
 Omni Means Engineers & Planners
 ADDRESS (Business Address Acceptable)
 309 W. Main St., Visalia, CA 93291
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Tulare County's "One Voice" Trip to DC

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
2 / 24 / 10	\$ 110.00	Capitol Hill Club Meal
2 / 24 / 10	\$ 110.00	Spouse's meal
/ /	\$	

► NAME OF SOURCE
 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

► NAME OF SOURCE
 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

► NAME OF SOURCE
 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

► NAME OF SOURCE
 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

► NAME OF SOURCE
 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

Comments: _____